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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/552,718
Filing Date	April 11, 2003
First Named Inventor	Oram, Robert, K
Title	Buoyancy Clamp.....Application
Art Unit	
Examiner Name	
Attorney Docket Number	Weitzel 348

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Michael Y. Epstein	21188

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

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<input checked="" type="checkbox"/> Firm or Individual Name	Michael Y. Epstein		
Address	1551 Ben Sawyer Blvd. # 5A		
City	Mt. Pleasant	State	SC
Country	USA		
Telephone	843-971-8704	Email	myeps@bellsouth.net

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Kevan Frederik Stokes</i>	Date	11/10/06
Name	Kevan Frederik Stokes	Telephone	01224 780978
Title and Company	LEAD ENGINEER BALMORAL GROUP LTD		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".

☒ *Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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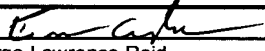
<input checked="" type="checkbox"/> Firm or Individual Name	Michael Y. Epstein				
Address	1551 Ben Sawyer Blvd. # 5A				
City	Mt. Pleasant	State	SC	Zip	29464
Country	USA				
Telephone	843-971-8704	Email	myeps@bellsouth.net		

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SIGNATURE of Applicant or Assignee of Record

Signature		Date	12/10/06
Name	Ewan George Lawrence Reid	Telephone	
Title and Company			

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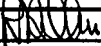
<input checked="" type="checkbox"/> Firm or Individual Name	Michael Y. Epstein				
Address	1551 Ben Sawyer Blvd. #5A				
City	Mt. Pleasant	State	SC	Zip	29464
Country	USA				
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Signature		Date	11.06.2006
Name	Robert Kenneth Oram	Telephone	
Title and Company			

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